

RETURN APPLICATION
TO YOUR TEACHER BY
THIS DATE!:



What is the O₂ Program?

The O₂ Program is a Seattle Parks and Recreation program serving teens 15 - 19 years of age. The program uses fun outdoor activities to teach teens about the environment, leadership and job skills.

What does the O₂ Program do?

The three main components of the O₂ Program are:

- **Free after school workshops:** Tuesdays, Wednesdays, some Thursdays 4-6pm
- **Free day and overnight trips:** Weekends, school vacations and during the summer
- **Free service projects:** Saturdays 10am-2pm

Everything we do is **free**, you don't need any special equipment to do our activities, and **no experience is necessary!** You don't have to do all of our activities. You can pick the activities that work best for your schedule. To see a list of program activities, go to the website www.seattle.gov/parks/teens/o2 and click on the link "Calendar". If you would like to receive monthly email updates, sign up for our program Listserv by entering your email into the O₂ e-newsletter box on our website.

On each trip you will try a new outdoor activity such as backpacking, rock climbing, river rafting, snowboarding, mountain biking etc. Come learn about the environment, meet students from different high schools, eat great food and have some FUN!

Where / When does the program meet?

The O₂ Program has a North and a South End, and we have some joint programs where both groups meet up. The O₂ Program meets when you are not in school.

During the school year we offer after school programs on Tuesdays, Wednesdays, and some Thursdays. Overnight trips take place 2 weekends a month and we host one Saturday service project each month.

During the summer, we offer day trips Tuesdays through Friday and extended multiday trips throughout the summer.

How do I join?

FILL OUT THE APPLICATION: Please fill out the attached application completely. If you are under 18, make sure to have a parent / guardian sign in the correct places. If you need another application, click the "APPLY" link on our website, print and fill out.

TURN IN THE APPLICATION: You can turn in the O₂ application 3 different ways:

- Bring it back to your teacher by the date written in the top right corner
- Call and sign up for an event and bring your application with you

Discovery Park ELC
O₂ Program
3801 W. Government Way
Seattle, WA 98126

Once we've received your application, we will call you to arrange for you to attend an orientation at one of our two locations. Space on individual trips is first-come first-serve.

Have additional questions? Please feel free to contact our O₂ staff:
Bob Warner (206) 890-2513 robert.warner@seattle.gov
Emily Sachwald (206) 390-1018 emily.sachwald@seattle.gov
Evan McKenna (206) 423-1501 evan.mckenna@seattle.gov
Suzannah Klaniecki (206) 423-3460 Suzannah.klaniecki@seattle.gov

www.seattle.gov/parks/teens/o2

O₂ Program





O₂ Program Application

Personal Information

NAME: _____ AGE: _____ BIRTHDATE: _____

MAILING ADDRESS: _____

(City, State, Zip Code) _____

HOME PHONE: (____) _____ CELL PHONE: (____) _____

EMAIL: _____ SCHOOL ATTENDING: _____

Would you like to receive our program calendar via E-mail _____ or mailed to your home address _____

ETHNIC GROUP(s): _____ GENDER: _____

LANGUAGE(s) SPOKEN: _____

I WILL BE ATTENDING EVENTS AT: _____ CAMP LONG (Cleveland, Rainier Beach, West
Seattle, Sealh)
____X____ DISCOVERY PARK (North Seattle, Garfield,
Franklin)

All applicants must complete:

I have read all enclosed materials concerning the Seattle Department of Parks and Recreation, O₂ program. I certify that all the statements made in this application are true to the best of my knowledge.

Print Name: _____

Sign Name: _____

Parental or Guardian Approval for Applicants Under 18 Years of Age:

We have read and understand the enclosed materials that describe the Seattle Department of Parks and Recreation, O₂ program. We have discussed the O₂ program with our son / daughter and understand that the outdoor events may occur in remote locations / settings, and authorize him / her to apply for and participate in the O₂ program.

X _____
Signature of parent/ guardian

Name of parent/guardian



2017 PARTICIPANT INFORMATION AND AUTHORIZATION FORM

Facility/Program: _____

This information is considered confidential and is used only to help staff meet the needs of your child. Please fill out all sections completely (mark N/A if a section does not apply) and sign and initial where indicated. Additional information may be required, including but not limited to immunization records, medical treatment, medication administration instructions and authorization, and special field trip permission. If you have updated information on this form, please contact staff immediately to update.

PARTICIPANT AND PARENT INFORMATION

Child's Name (First & Last)		Age	Birth Date	Male	Female
Address		City	ZIP	School	Grade
Parent/Guardian Name (First & Last)			Signature		
Day Phone	Cell Phone/Pager	Evening Phone	E-mail		
Address (if different than above)		City	ZIP		
Relationship to Child <input type="checkbox"/> Parent <input type="checkbox"/> Guardian <input type="checkbox"/> Foster Parent		Language(s) Spoken at Home			

GENERAL AUTHORIZATIONS AND INFORMATION

My child has attended a Seattle Parks School Age Care Program. ☐ No ☐ Yes – Location: _____

My child has permission to participate in field trips including, but not limited to, visits to a local library or park, neighborhood walk, or other field trip as posted, by means of walking, public bus, Dept van, yellow bus. ☐ YES ☐ NO Initial Here _____

My child has permission to participate in swimming and other water activities at Seattle Parks and Recreation facilities, including swimming pools, lifeguarded beaches, boating facilities, and wading pools. ☐ YES ☐ NO Initial Here _____

Swimming Ability: ☐ Non Swimmer ☐ Beginner ☐ Intermediate ☐ Advanced

My child may apply sunscreen _____ times during the day. I will provide sunscreen. ☐ YES ☐ NO Initial Here _____

My child may be photographed (stills and video) for the City of Seattle, its Department of Parks and Recreation, the Associated Recreation Council, Advisory Council, or Community Center publications. ☐ YES ☐ NO Initial Here _____

My child has the following behavioral issues which staff should be aware: _____	I handle these behaviors in the following way: _____
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EMERGENCY CONTACTS (Also authorized for participant pick-up)

The Parent/Guardian named above will be contacted first in case of emergency (after 911). Please list additional parents, guardians, and others you would like us to contact if we cannot reach you.

1) Contact Name (First & Last)			Relationship
Day Phone	Cell Phone/Pager	Evening Phone	E-mail
Address		City	ZIP
2) Contact Name (First & Last)			Relationship
Day Phone	Cell Phone/Pager	Evening Phone	E-mail
Address		City	ZIP

PICK-UP AUTHORIZATION AND INFORMATION (MINIMUM AGE 14)

Please list all individuals who are authorized to pick up your child. Individuals listed must be at least 14 years old. If an individual is not listed, your child will not be released. We will not accept voice authorization for pick-up.

1) Name	Relationship	Day Phone	Evening Phone
Address			
2) Name	Relationship	Day Phone	Evening Phone
Address			
3) Name	Relationship	Day Phone	Evening Phone
Address			

Child Sign In and Sign Out Procedures

The parent or other person listed above authorized by the parent to take the child to and from the center/program site shall sign in the child on arrival and sign out the child at departure using a full, legal signature. When the child leaves the center/program site to attend school or other off-site activities as authorized by the parent, the staff person shall sign out the child and sign in the child upon return to the center/program. (WAC 170-297-2125)